

SPRING ARBOR UNIVERSITY
Michigan Army and Air National Guard Grant
2015-2016 Application Form

Name _____ Social Security No. _____

Address _____ Phone # (____) _____

City _____ State _____ Zip Code _____

A. Enrollment Status at Spring Arbor University:

Number of credit hours you plan to take during semesters for which you are requesting aid:

_____ Fall 2015 _____ Interim 2016 _____ Spring 2016 _____ Summer 2016

Undergraduate _____ Graduate _____

B. Financial Information:

Have you filed the *Free Application for Federal Student Aid* (FAFSA) for 2015-2016? ____ Yes ____ No
If "No," please indicate the anticipated date when you intend to complete this form: _____
Date

C. Certification by the applicant's Michigan Army or Air National Guard Unit:

I certify that the above named applicant is a member of the Michigan Army or Air National Guard and eligible for the Spring Arbor University grant.

Signature Printed Name Title

Unit Phone Number Date

D. Certifying Official at State Education Office:

Signature Branch Date

State Education Office-Room 320
3423 N. Martin Luther King Blvd
Lansing, MI 48906-2934
Phone 517-481-7640
Fax 517-481-7782